MEMORIAL NURSING HOME 205 PARKER STREET

BOSCOBEL	53805	Phone: (608) 375-4112		Ownership:	Non-Profit Corporation
Operated from	1/1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Con	junction with	Hospital?	Yes	Operate in Conjunction with CBRF?	No

Number of Beds Set Up and Staffed (12/31/03): 66 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/03): 72 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/03: 65 Average Daily Census: 64

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (12/31/03)	Length of Stay (12/31/03)	%
Home Health Care Supp. Home Care-Personal Care	No No	 Primary Diagnosis 		 Age Groups 	% 	 Less Than 1 Year 1 - 4 Years	18.5 55.4
Supp. Home Care-Household Services No					16.9		
Day Services No		Mental Illness (Org./Psy) 41		65 - 74 7.			
Respite Care	Yes	Mental Illness (Other)	4.6	75 - 84	29.2		90.8
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	47.7	* * * * * * * * * * * * * * * * * * *	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	12.3	Full-Time Equivalent	
Congregate Meals	No	Cancer	1.5			Nursing Staff per 100 Res:	idents
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)	
Other Meals	No	Cardiovascular	20.0	65 & Over	96.9		
Transportation	No	Cerebrovascular	6.2			RNs	9.4
Referral Service	No	Diabetes	1.5	Gender	8	LPNs	11.6
Other Services	No	Respiratory	3.1			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	15.4	Male	23.1	Aides, & Orderlies	41.5
Mentally Ill	No			Female	76.9		
Provide Day Programming for			100.0				
Developmentally Disabled	No			1	100.0		
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Method of Reimbursement

		Medicare			edicaid itle 19			Other			Private Pay	:		amily Care			anaged Care	l 		
Level of Care	No.	90	Per Diem (\$)	No.	οlo	Per Diem (\$)	No.	્ર	Per Diem (\$)	No.	90	Per Diem (\$)	No.	્રે જ	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	1	100.0	271	42	85.7	119	0	0.0	0	15	100.0	138	0	0.0	0	0	0.0	0	58	89.2
Intermediate				5	10.2	100	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	7.7
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				2	4.1	172	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	3.1
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	1	100.0		49	100.0		0	0.0		15	100.0		0	0.0		0	0.0		65	100.0

County: Grant Facility ID: 5540 Page 2 MEMORIAL NURSING HOME

Admissions, Discharges, and		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03										
Deaths During Reporting Period	ì			 ۶		Total						
ercent Admissions from:	į	Activities of	8	Ass	sistance of	% Totally	Number of					
Private Home/No Home Health	14.6	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents					
Private Home/With Home Health	8.3	Bathing	0.0		73.8	26.2	65					
Other Nursing Homes	4.2	Dressing	20.0		58.5	21.5	65					
Acute Care Hospitals	70.8	Transferring	35.4		47.7	16.9	65					
Psych. HospMR/DD Facilities	0.0	Toilet Use	30.8		49.2	20.0	65					
Rehabilitation Hospitals	0.0	Eating	61.5		27.7	10.8	65					
Other Locations	2.1	******	*****	*****	*****	******	*****					
otal Number of Admissions	48	Continence		용	Special Treatmen	ts	%					
ercent Discharges To:		Indwelling Or Extern	al Catheter	4.6	Receiving Resp	iratory Care	7.7					
Private Home/No Home Health	25.0	Occ/Freq. Incontinen	t of Bladder	47.7	Receiving Trac	heostomy Care	0.0					
Private Home/With Home Health	20.5	Occ/Freq. Incontinen	t of Bowel	30.8	Receiving Suct	ioning	0.0					
Other Nursing Homes	2.3				Receiving Osto	my Care	1.5					
Acute Care Hospitals	13.6	Mobility			Receiving Tube	Feeding	3.1					
Psych. HospMR/DD Facilities	2.3	Physically Restrained	d	0.0	Receiving Mech	anically Altered Diets	20.0					
Rehabilitation Hospitals	0.0											
Other Locations	0.0	Skin Care			Other Resident C	haracteristics						
Deaths	36.4	With Pressure Sores		4.6	Have Advance D	irectives	84.6					
otal Number of Discharges	1	With Rashes		0.0	Medications							
(Including Deaths)	44				Receiving Psyc	hoactive Drugs	66.2					

	This	Other 1	Hospital-	I	All
	Facility	Based F	acilities	Fac	ilties
	%	용	Ratio	8	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	87.8	90.1	0.97	87.4	1.00
Current Residents from In-County	84.6	83.8	1.01	76.7	1.10
Admissions from In-County, Still Residing	35.4	14.2	2.50	19.6	1.80
Admissions/Average Daily Census	75.0	229.5	0.33	141.3	0.53
Discharges/Average Daily Census	68.8	229.2	0.30	142.5	0.48
Discharges To Private Residence/Average Daily Census	31.3	124.8	0.25	61.6	0.51
Residents Receiving Skilled Care	89.2	92.5	0.96	88.1	1.01
Residents Aged 65 and Older	96.9	91.8	1.06	87.8	1.10
Title 19 (Medicaid) Funded Residents	75.4	64.4	1.17	65.9	1.14
Private Pay Funded Residents	23.1	22.4	1.03	21.0	1.10
Developmentally Disabled Residents	6.2	1.2	5.18	6.5	0.95
Mentally Ill Residents	46.2	32.9	1.40	33.6	1.37
General Medical Service Residents	15.4	22.9	0.67	20.6	0.75
Impaired ADL (Mean) *	44.9	48.6	0.92	49.4	0.91
Psychological Problems	66.2	55.4	1.19	57.4	1.15
Nursing Care Required (Mean) *	4.6	7.0	0.66	7.3	0.63